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CONFIRMATION NO. 9

SERIAL NUMBER 09/310,912	FILING DATE 05/13/1999 RULE	CLASS 395	GROUP ART UNIT 2124	ATTORNEY DOCKET NO. AT9-99-073
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APPLICANTS

ALEXANDER ERIK MERICAS, AUSTIN, TX;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/08/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 8	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 8
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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TITLE

METHOD AND SYSTEM FOR COUNTING NON-SPECULATIVE EVENTS IN A SPECULATIVE PROCESSOR

FILING FEE RECEIVED 1150	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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SERIAL NUMBER 09/310,912	FILING DATE 05/13/99	CLASS 211 717	GROUP ART UNIT 2751 2122	ATTORNEY DOCKET NO. AT9-99-073
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APPLICANT

ALEXANDER ERIK MERICAS, AUSTIN, TX.

CONTINUING DOMESTIC DATA***

VERIFIED

N/A

371 (NAT'L STAGE) DATA***

VERIFIED

N/A

FOREIGN APPLICATIONS***

VERIFIED

N/A

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 06/08/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY TX	SHEETS DRAWING 8	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 8
Verified and Acknowledged <u>ga</u> Examiner's Initials _____		Initials _____			

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TITLE	METHOD AND SYSTEM FOR COUNTING NON-SPECULATIVE EVENTS IN A SPECULATIVE PROCESSOR
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FILING FEE RECEIVED \$1,150	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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